									Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001									10/086173					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	EN	ιπ τ γ □	OR	OTHER		
TOTAL CLAIMS			100					RATE		FEE	l	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE 370.00		370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			100 minus 20=		· 80			X\$ 9=			ОЯ	X\$18≃	1440.Q	
INDEPENDENT CLAIMS			∠ minus 3 =		• /			X42=		OR	X84=	84.20		
MULTIPLE DEPENDENT CLAIM PR			RESENT					+140=		OR	+280=			
* If the difference in column 1 is			less than zero, enter "0" in column 2					TOTAL		OR	TOTAL			
	C		MENDED	ENDED - PART II					•			OIHER		
		(Column 1) CLAIMS		(Colui		(Column 3)	ī	SMAL	.L. E	ADDI-	OR	SMALL	ADDI-	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID		DUSLY EXTRA		RATE		TIONAL FEE		RATE	TIONAL	
	Total	· 30	Minus	*/(10	-	1	X\$ 9=			OR	X\$18≈		
	Independent	* 2	Minus	*** 4		= -		X42=	1		OR	X84=		
نــا	FINST PRESE	NTATION OF M	DETIPLE DEF	ENDEN	CLAIM		'	+140=	;>	1. A. dienseur	OR'	m+280=		
	h							TOT/			OR	TOTAL ADDIT FEE		
		(Column 1)		(Colur	mn 2)_	(Column 3)	•	100n. i c		11 . 12 . 14 1 . 19 . 19			1.0	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	· 80	Minus	** /C	9 <i>Ç</i>	= _] [X\$ 9=			OR	X\$18=		
	Independent	* U	Minus	***	COLAINA	1-0		X42=		The section of the se	ΘR	_X84=		
-	PROT PRESE	INTERIOR OF MIC	CHIPEE DEF	LIVOLIVI	OLAIN		۱ ۱	+140=			OR	+280=		
							<u>-</u>	TOTA			OR	TOTAL ADDIT, FEE	0	
		(Column 1)		(Colu		(Column 3)	_ `							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	_	=	1 [X\$ 9≈	1		OR:	X\$18=		
	Independent	*	Minus	***		=-]	X42=	+			X84=		
	FIRST PRESE	NTATION OF MI	ULTIPLE DEF	PENDENT	CLAIM		J	+140=	+		OR			
* 1	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280= TOTAL		
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." *If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."														
•	The 'Highest Num	ber Previously Pai	d For" (Total or	Independ	ent) is the	e highest numbe	er fou	nd in the	app	ropriate box	in co	lumn 1.		

Service Services